# FORM D



UNITED STATES
SECURITIES AND EXCHANGE COMMISSION
Washington, D.C. 20549

FORM D

NOTICE OF SALE OF SECURITIES

PURSUANT TO REGULATION D, SECTION 4(6), AND/OR UNIFORM LIMITED OFFERING EXEMPTION

1316896

210

D SEC USE ONLY
Prefix Serial

DATE RECEIVED

| <del>, 1 , 1 , 1 , 1 , 1 , 1 , 1 , 1 , 1 , 1</del>  |  |  |  |  |  |  |  |  |
|---|--|--|--|--|--|--|--|--|
| Name of Offering: (check if this is an amendment and name has changed, and indicate change.)                                    |  |  |  |  |  |  |  |  |
| Callaway Consumer Products, LLC. Preferred A Unit   |  |  |  |  |  |  |  |  |
| Filing Under (Check box(es) that apply):    Rule 504    Rule 505    Rule 506    Section 4(6)    ULOE                            |  |  |  |  |  |  |  |  |
| Type of Filing: New Filing Amendment  |  |  |  |  |  |  |  |  |
| A: BASIC IDENTIFICATION DATA  |  |  |  |  |  |  |  |  |
| 1. Enter the information requested about the issuer.  |  |  |  |  |  |  |  |  |
| Name of Issuer: (check if this is an amendment and name has changed, and indicate change.)                                      |  |  |  |  |  |  |  |  |
| Callaway Consumer Products, LLC.  |  |  |  |  |  |  |  |  |
| Address of Executive Offices (Number and Street, City, State, Zip Code) Telephone Number (Including Area Code)                  |  |  |  |  |  |  |  |  |
| 4300 N. Miller Rd. #242, Scottsdale, AZ, 85251 (480) 664-8729   |  |  |  |  |  |  |  |  |
| Address of Principal Business Operations (Number and Street, City, State, Zip Code) Telephone Number (Including Area Code)      |  |  |  |  |  |  |  |  |
| (if different from Executive Offices)  PROCESSED  |  |  |  |  |  |  |  |  |
|   |  |  |  |  |  |  |  |  |
| Brief Description of Business  Developing and marketing healthy food products to consumers with nutritional needs  OCT 0 4 2006 |  |  |  |  |  |  |  |  |
| Developing and marketing healthy food products to consumers with nutritional needs  |  |  |  |  |  |  |  |  |
| Type of Business Organization:  |  |  |  |  |  |  |  |  |
| corporation limited partnership, already formed other (please specific Alability company, already formed                        |  |  |  |  |  |  |  |  |
| business trust limited partnership, to be formed  |  |  |  |  |  |  |  |  |
| Month Year  |  |  |  |  |  |  |  |  |
| Actual or Estimated Date of Incorporation or Organization: 0 9 0 4  |  |  |  |  |  |  |  |  |
| Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service abbreviation for State: A Z                |  |  |  |  |  |  |  |  |
| CN for Canada; FN for other foreign jurisdiction)   |  |  |  |  |  |  |  |  |

# GENERAL INSTRUCTIONS

### Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

State: This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix in the notice constitutes a part of this notice and must be completed.

#### **ATTENTION**

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

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required to respond unless the form displays a currently valid OMB control number arbanemerteicarentara Enter the information requested for the following: Each promoter of the issuer, if the issuer has been organized within the past five years; Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer: Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and Each general and managing partner of partnership issuers. ⊠ Executive Officer □ Director Check Box(es) that Apply: ☐ Promoter □ Beneficial Owner □ General and/or Managing Partner Full Name (Last name first, if individual) Callaway, Laryn Business or Residence Address (Number and Street, City, State, Zip Code) 4300 N. Miller Rd. #242, Scottsdale, AZ, 85251 🖾 Promoter 💢 Beneficial Owner 🔝 Executive Officer 🔝 Director 🐷 Greneral and/or Managing Part Elie K Box es out Amby MUE Vener (başımara e firal kirindi yanan) Bijlies or Residence Address (Mimber and Street, Cap. State: Zint Code) 5 W- Why Wolffy Lin- Phoenix, AZ, 85021. ☐ Executive Officer Check Box(es) that Apply: Promoter □ Beneficial Owner Director General and/or Managing Partner Full Name (Last name first, if individual) Mark<sup>2</sup>, LLC Business or Residence Address (Number and Street, City, State, Zip Code) 11698 E. Wethersfield Rd., Scottsdale, AZ, 85259 Acok Ben (es) that Apply 🔑 📃 Promoter-Beneficial Owner Executive Officer Director General and/or vianaging Party intravione (ensurance installmenty (hall). en Olames investment Sunt. D.C. usines of Residence Address (Number and Street, Lity, State, Zip Code). 21 Washington St. 3<sup>ed</sup> Ele San Francisco (CA: 94414 Promoter Beneficial Owner Executive Officer Director Check Box(es) that Apply: ☐ General and/or Managing Partner Full Name (Last name first, if individual) Merkl, Andreas Business or Residence Address (Number and Street, City, State, Zip Code) 4300 N. Miller Rd. #242, Scottsdale, AZ, 85251 trical Box(ex) Ibat Apply Promoter Weneticial Owner 🔀 Executive Officer 🔲 Director 🔯 General and/or Managing Partn but Name (Cast name first at andividual) Presion Walk Fusiness or Residence Address (Number and Street, City, State, Zip Code) MOCO STUGERAL #242 Scensciale AZ 15525 Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner Check Box(es) that Apply: Full Name (Last name first, if individual) Whitehouse, Mark Business or Residence Address (Number and Street, City, State, Zip Code) 4300 N. Miller Rd. #242, Scottsdale, AZ, 85251 Check Box(es) that Applys 🔑 🔲 Promoter 🛴 Beneficial Owner 💝 🔲 Executive Officers 🗐 Director. 💢 General and/or Managing Pain Fajl Mane (Lastagne Brst. if individual). Wasilin Jason Business of Residence Address (Number and Street, City, State, Zip Code 300 N. Miller Rd. #242 Scottschie, AZ. 85251 Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director ☐ General and/or Managing Partner Full Name (Last name first, if individual)

(Use blank sheet, or copy and use additional copies of this sheet, as necessary)

## B. INFORMATION ABOUT OFFERING

Yes No

Business or Residence Address (Number and Street, City, State, Zip Code)

| Answer also in Appendix, Column 2, if filing under ULOE.  |               |  |  |  |  |  |  |  |
|---|---------------|--|--|--|--|--|--|--|
| 2. What is the minimum investment that will be accepted from any individual?  |               |  |  |  |  |  |  |  |
|   | Yes No<br>⊠ □ |  |  |  |  |  |  |  |
| 3. Does the offering permit joint ownership of a single unit?   |               |  |  |  |  |  |  |  |
| 4. Enter the information requested for each person who has been or will be paid or given, directly or indirectly, any commission or similar remuneration for solicitation of purchasers in connection with sales of securities in the offering. If a person to be listed is an  |               |  |  |  |  |  |  |  |
| associated person or agent of a broker or dealer registered with the SEC and/or with a state or states, list the name of the broker or  |               |  |  |  |  |  |  |  |
| dealer. If more than five (5) persons to be listed are associated persons of such a broker or dealer, you may set forth the information   |               |  |  |  |  |  |  |  |
| for that broker or dealer only.   |               |  |  |  |  |  |  |  |
| Full Name (Last name first, if individual)  |               |  |  |  |  |  |  |  |
|   |               |  |  |  |  |  |  |  |
| Business or Residence Address (Number and Street, City, State, Zip Code)  |               |  |  |  |  |  |  |  |
| Name of Associated Broker or Dealer   |               |  |  |  |  |  |  |  |
| Name of Associated Broker of Dealer   |               |  |  |  |  |  |  |  |
| States in Which Person Listed Has Solicited or Intends to Solicit Purchasers  |               |  |  |  |  |  |  |  |
| (Check "All States" or check individual States)   | . All States  |  |  |  |  |  |  |  |
| [AL] [AK] [AZ] [AR] [CA] [CO] [CT] [DE] [DC] [FL] [GA] [HI] [ID]  |               |  |  |  |  |  |  |  |
| [IL] [IN] [IA] [KS] [KY] [LA] [ME] [MD] [MA] [MI] [MN] [MS] [MO]  |               |  |  |  |  |  |  |  |
| [MT] [NE] [NV] [NH] [NJ] [NM] [NY] [NC] [ND] [OH] [OK] [OR] [PA] [RI] [SC] [SD] [TN] [TX] [UT] [VT] [VA] [WA] [WV] [WI] [WY] [PR]   |               |  |  |  |  |  |  |  |
| Full Name (Last name first, if individual)  |               |  |  |  |  |  |  |  |
| I thi raile (bust hairs in 55, it interretain)  |               |  |  |  |  |  |  |  |
| Business or Residence Address (Number and Street, City, State, Zip Code)  |               |  |  |  |  |  |  |  |
|   |               |  |  |  |  |  |  |  |
| Name of Associated Broker or Dealer   |               |  |  |  |  |  |  |  |
|   |               |  |  |  |  |  |  |  |
| States in Which Person Listed Has Solicited or Intends to Solicit Purchasers  | _             |  |  |  |  |  |  |  |
| (Check "All States" or check individual States)   | . All States  |  |  |  |  |  |  |  |
| [AL] [AK] [AZ] [AR] [CA] [CO] [CT] [DE] [DC] [FL] [GA] [HI] [ID]  |               |  |  |  |  |  |  |  |
| [IL] [IN] [IA] [KS] [KY] [LA] [ME] [MD] [MA] [MI] [MN] [MS] [MO] [MT] [NE] [NV] [NH] [NJ] [NM] [NY] [NC] [ND] [OH] [OK] [OR] [PA]   |               |  |  |  |  |  |  |  |
| [RI] [SC] [SD] [TN] [TX] [UT] [VT] [VA] [WA] [WV] [WI] [WY] [PR]  |               |  |  |  |  |  |  |  |
| Full Name (Last name first, if individual)  |               |  |  |  |  |  |  |  |
|   |               |  |  |  |  |  |  |  |
| Business or Residence Address (Number and Street, City, State, Zip Code)  |               |  |  |  |  |  |  |  |
|   |               |  |  |  |  |  |  |  |
| Name of Associated Broker or Dealer   |               |  |  |  |  |  |  |  |
|   | <del></del>   |  |  |  |  |  |  |  |
| States in Which Person Listed Has Solicited or Intends to Solicit Purchasers  | . All States  |  |  |  |  |  |  |  |
| (Check "All States" or check individual States)   | ☐ An States   |  |  |  |  |  |  |  |
| [AL] [AK] [AZ] [AR] [CA] [CO] [CT] [DE] [DC] [FL] [GA] [HI] [ID]<br>[IL] [IN] [IA] [KS] [KY] [LA] [ME] [MD] [MA] [MI] [MN] [MS] [MO]  |               |  |  |  |  |  |  |  |
| [MT] [NE] [NV] [NH] [NJ] [NM] [NY] [NC] [ND] [OH] [OK] [OR] [PA]  |               |  |  |  |  |  |  |  |
| [RI] [SC] [SD] [TN] [TX] [UT] [VT] [VA] [WA] [WV] [WI] [WY] [PR]  |               |  |  |  |  |  |  |  |
| Full Name (Last name first, if individual)  |               |  |  |  |  |  |  |  |
| D. J. D. J. A. A. A. O. J. J. G. A. C. G. G. J. C. J. J. C. |               |  |  |  |  |  |  |  |
| Business or Residence Address (Number and Street, City, State, Zip Code)  |               |  |  |  |  |  |  |  |
| N. CA. L. D. L. D. L.   |               |  |  |  |  |  |  |  |
| Name of Associated Broker or Dealer   |               |  |  |  |  |  |  |  |
| States in Which Person Listed Has Solicited or Intends to Solicit Purchasers  |               |  |  |  |  |  |  |  |
| (Check "All States" or check individual States)   |               |  |  |  |  |  |  |  |
| [AL] [AK] [AZ] [AR] [CA] [CO] [CT] [DE] [DC] [FL] [GA] [HI] [ID]  |               |  |  |  |  |  |  |  |
| [IL] [IN] [IA] [KS] [KY] [LA] [ME] [MD] [MA] [MI] [MN] [MS] [MO]  |               |  |  |  |  |  |  |  |
| [MT] [NE] [NV] [NH] [NJ] [NM] [NY] [NC] [ND] [OH] [OK] [OR] [PA]  |               |  |  |  |  |  |  |  |
| [RI] [SC] [SD] [TN] [TX] [UT] [VT] [VA] [WA] [WV] [WI] [WY] [PR]  |               |  |  |  |  |  |  |  |
| (Use blank sheet, or copy and use additional copies of this sheet, as necessary.)   |               |  |  |  |  |  |  |  |

<sup>1.</sup> Enter the aggregate offering price of securities included in this offering and the total amount already

|         | m 00 V  | Aggregate Offering Price  | Amount Already<br>Sold               |
|---------|---|---|--------------------------------------|
|         | Type of Security  | \$  | \$                                   |
|         | Debt  | ¢   | •                                    |
|         | Equity  | <u> </u>  | <u> </u>                             |
|         | Common Preferred  | <b>r</b>  | ¢                                    |
|         | Convertible Securities (including warrants)   | <u> </u>  | 3 =                                  |
|         | Partnership Interests   | \$  | <u> </u>                             |
|         | Other (Specify: Units of LLC)   | \$ 2,300,000  | \$ 1,700,000                         |
|         | ☐ Common ☐ Preferred  | <b>A A</b> 200 000  | # 1 #00 000                          |
|         | Total   | \$ 2,300,000  | \$ 1,700,000                         |
|         | Answer also in Appendix, Column 3, if filing under ULOE.  |   |                                      |
| o<br>ir | Inter the number of accredited and non-accredited investors who have purchased securities in this affering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, adjuste the number of persons who have purchased securities and the aggregate dollar amount of neir purchases on the total lines. Enter "0" if answer is "none" or "zero."  |   |                                      |
|         |   | Number<br>Investors   | Aggregate Dollar Amount of Purchases |
|         | Accredited Investors  | 1   | \$ 1,700,000                         |
|         | Non-accredited Investors  | 0   | <u>\$</u>                            |
|         | Total (for filings under Rule 504 only)   | N/A   | \$ N/A                               |
|         |   |   |                                      |
|         | Answer also in Appendix, Column 4, if filing under ULOE.  This filing is for an offering under Rule 504 or 505, enter the information requested for all   |   |                                      |
| p:      | Answer also in Appendix, Column 4, if filing under ULOE.  If this filing is for an offering under Rule 504 or 505, enter the information requested for all eccurities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months rior to the first sale of securities in this offering. Classify securities by type listed in Part C - question 1.                             | Type of   | Dollar Amount                        |
| p:      | Answer also in Appendix, Column 4, if filing under ULOE.  If this filing is for an offering under Rule 504 or 505, enter the information requested for all eccurities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months rior to the first sale of securities in this offering. Classify securities by type listed in Part C - question 1.  Type of offering           | Security  | Sold                                 |
| p:      | Answer also in Appendix, Column 4, if filing under ULOE.  If this filing is for an offering under Rule 504 or 505, enter the information requested for all eccurities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months rior to the first sale of securities in this offering. Classify securities by type listed in Part C - question 1.  Type of offering  Rule 505 | Security N/A  | Sold <b>\$</b> N/A                   |
| p:      | Answer also in Appendix, Column 4, if filing under ULOE.  If this filing is for an offering under Rule 504 or 505, enter the information requested for all ecurities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months rior to the first sale of securities in this offering. Classify securities by type listed in Part C - question 1.  Type of offering  Rule 505  | Security N/A N/A  | \$ N/A<br>\$ N/A                     |
| p:      | Answer also in Appendix, Column 4, if filing under ULOE.  If this filing is for an offering under Rule 504 or 505, enter the information requested for all eccurities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months rior to the first sale of securities in this offering. Classify securities by type listed in Part C - tuestion 1.  Type of offering  Rule 505 | Security N/A N/A N/A  | \$ N/A<br>\$ N/A<br>\$ N/A           |
| p:      | Answer also in Appendix, Column 4, if filing under ULOE.  If this filing is for an offering under Rule 504 or 505, enter the information requested for all eccurities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months rior to the first sale of securities in this offering. Classify securities by type listed in Part C - tuestion 1.  Type of offering  Rule 505 | Security N/A N/A  | \$ N/A<br>\$ N/A                     |
| se<br>p | Answer also in Appendix, Column 4, if filing under ULOE.  If this filing is for an offering under Rule 504 or 505, enter the information requested for all ecurities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months rior to the first sale of securities in this offering. Classify securities by type listed in Part C - question 1.  Type of offering  Rule 505  | Security N/A N/A N/A  | \$ N/A<br>\$ N/A<br>\$ N/A           |
| p<br>Q  | Answer also in Appendix, Column 4, if filing under ULOE.  If this filing is for an offering under Rule 504 or 505, enter the information requested for all eccurities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months rior to the first sale of securities in this offering. Classify securities by type listed in Part C - question 1.  Type of offering  Rule 505 | Security N/A N/A N/A N/A N/A  | \$ N/A<br>\$ N/A<br>\$ N/A           |
| p<br>Q  | Answer also in Appendix, Column 4, if filing under ULOE.  If this filing is for an offering under Rule 504 or 505, enter the information requested for all ecurities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months rior to the first sale of securities in this offering. Classify securities by type listed in Part C - question 1.  Type of offering  Rule 505  | Security  N/A  N/A  N/A  N/A  N/A                                   | \$ N/A \$ N/A \$ N/A \$ N/A          |
| p<br>Q  | Answer also in Appendix, Column 4, if filing under ULOE.  If this filing is for an offering under Rule 504 or 505, enter the information requested for all ecurities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months rior to the first sale of securities in this offering. Classify securities by type listed in Part C - question 1.  Type of offering  Rule 505  | Security  N/A  N/A  N/A  N/A  N/A                                   | \$ N/A \$ N/A \$ N/A \$ N/A          |
| p<br>Q  | Answer also in Appendix, Column 4, if filing under ULOE.  If this filing is for an offering under Rule 504 or 505, enter the information requested for all ecurities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months rior to the first sale of securities in this offering. Classify securities by type listed in Part C - question 1.  Type of offering  Rule 505  | N/A   | \$ N/A \$ N/A \$ N/A \$ N/A \$ N/A   |
| p<br>Q  | Answer also in Appendix, Column 4, if filing under ULOE.  It this filing is for an offering under Rule 504 or 505, enter the information requested for all ecurities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months rior to the first sale of securities in this offering. Classify securities by type listed in Part C - question 1.  Type of offering  Rule 505  | N/A   | \$ N/A \$ N/A \$ N/A \$ N/A \$ N/A   |
| p<br>Q  | Answer also in Appendix, Column 4, if filing under ULOE.  If this filing is for an offering under Rule 504 or 505, enter the information requested for all ecurities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months rior to the first sale of securities in this offering. Classify securities by type listed in Part C - truestion 1.  Type of offering  Rule 505 | Security  N/A  N/A  N/A  N/A  O  O  O  O  O  O  O  O  O  O  O  O  O | \$ N/A \$ N/A \$ N/A \$ N/A \$ N/A   |
| p<br>Q  | Answer also in Appendix, Column 4, if filing under ULOE.  If this filing is for an offering under Rule 504 or 505, enter the information requested for all ecurities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months rior to the first sale of securities in this offering. Classify securities by type listed in Part C - truestion 1.  Type of offering  Rule 505 | N/A   | \$ N/A \$ N/A \$ N/A \$ N/A \$ N/A   |
| p<br>Q  | Answer also in Appendix, Column 4, if filing under ULOE.  If this filing is for an offering under Rule 504 or 505, enter the information requested for all ecurities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months rior to the first sale of securities in this offering. Classify securities by type listed in Part C - truestion 1.  Type of offering  Rule 505 | Security  | \$ N/A \$ N/A \$ N/A \$ N/A \$ N/A   |

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| 5.  | Indicate below the amount of the adjusted gro<br>for each of the purposes shown. If the amoun<br>and check the box to the left of the estimate.<br>adjusted gross proceeds to the issuer set forth | <b>.</b>  |   |                                       |
|---|--|---|---|---------------------------------------|
|   |  |   | Payments to Officers,<br>Directors, and<br>Affiliates | Payments to<br>Others                 |
|   | Salaries and fees  |   | <u> </u>  | □ <b>\$</b>                           |
|   | Purchase of real estate  |   | □ <b>\$</b>   | □ <u>\$</u>                           |
| Purchase, rental or leasing and installation of machinery and equipment |  |   | □ <b>\$</b>   | <u> </u>                              |
|   | Construction or leasing of plant building  | s and facilities  | □ <b>\$</b>   | □ <b>\$</b>                           |
|   | Acquisition of other businesses (including offering that may be used in exchange for pursuant to a merger)   | <b>\$</b>   | □ <u>\$</u>   |                                       |
|   | •  |   | □ <b>\$</b>   | □ <b>\$</b>                           |
|   | Working capital  |   | <u> </u>  | <b>\$1,578,256.54</b>                 |
|   | Other (specify):   |   |   |                                       |
|   |  | ded)  |   | \$1.578,256.54<br>.578,256.54         |
|   |  | d. federal signature  |   |                                       |
| sign  | nature constitutes an undertaking by the issuer t  | by the undersigned duly authorized person. If this no furnish to the U.S. Securities and Exchange Communication investor pursuant to paragraph (b)(2) of Rule | nission, upon written request                         | 5, the following<br>of its staff, the |
| Issuer (Print or Type)  |  | Signature   | Date  |                                       |
| Callaway Consumer Products, LLC.  |  | Jangue Callanay   | September 26, 2006                                    |                                       |
| Nar   | ne of Signer (Print or Type)   | Title of Signer (Print or Type)   |   |                                       |
| Laryn Callaway  |  | Chief Executive Officer   |   |                                       |
|   |  |   |   |                                       |

ATTENTION

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)